

New and Current Aetna CDH Gold Members (Plan Year: July 1, 2017 – June 30, 2018)

Important Information Regarding Your Health Plan

Your coverage for the new plan year starts on July 1, 2017 and runs through June 30, 2018. As a reminder, Open Enrollment is the only time of the year that you can make changes to your benefit elections, unless you experience a [qualifying event](#) (birth, marriage, divorce, etc.).

Here are a few important reminders regarding your Aetna CDH Gold Plan:

- **ID CARDS:** You will receive new ID Cards in the mail from Aetna prior to July 1. Make sure you begin using the new cards on July 1. Always remember to show your card at the time of your health care service. This will help simplify the billing process.
- **PAY LESS BY STAYING IN-NETWORK:** Network providers are doctors, hospitals, and other health care providers that have an agreement with your health plan. You have the highest level of coverage and pay the least when you go to a network provider. If you choose to see a provider or doctor that is out-of-network, you will have to pay more money out of your pocket.
- **DEDUCTIBLES:** A deductible is the dollar amount you must pay up front, out-of-pocket, before your plan starts to pay. In-network and out-of-network services have a plan year deductible of \$1,500 per individual and \$3,000 per family.
- **HEALTH REIMBURSEMENT ACCOUNT (HRA):** This plan has a HRA that is funded by the State of Delaware and utilized by you to help cover out-of-pocket expenses. The State of Delaware makes an annual contribution to the HRA Fund in the amount of \$1,250 for an employee only (individual) plan and \$2,500 for a family plan. The HRA funds are used automatically to help offset your deductible. Any amount not used in the current plan year will roll over to the next plan year as long as you remain in the CDH Gold Plan.

Previously a Highmark Delaware CDH Gold Plan member and have unused HRA funds?

Any unused HRA funds will rollover to your Aetna CDH Gold Plan in October 2017. Should you need to access your prior year HRA funds before October, please contact the Statewide Benefits Office (SBO) at 1-800-489-8933 or benefits@state.de.us.

- **LAB SERVICES:** You must use **Quest Diagnostics** for your lab services. To find a Quest lab near you, access www.myaetnanetwork.com or call Aetna at 1-877-542-3862.
- **PCP:** Individuals enrolled in this plan are encouraged to have a **primary care physician (PCP)**, but it is not required. Having a PCP is important as he or she will assist you in managing your care with your other health care providers. To find a PCP, visit www.myaetnanetwork.com.
- **PREVENTIVE CARE:** Preventive services are **covered in-network at 100%** of the allowable charge (age and gender parameters may apply) and are not subject to a deductible or coinsurance. You can find a list of covered preventive services in the plan booklet.
- **HELP & SUPPORT:** Aetna is there to help with your questions. Call Aetna at 1-877-542-3862.

More detailed information on the Aetna CDH Gold Plan, including a plan booklet, is available on the Statewide Benefits Office (SBO) website at <http://ben.omb.delaware.gov/medical/aetna/index.shtml>.